

PROGRESS NOTES

PECONIC BAY MEDICAL CENTER
RIVERHEAD, N.Y.

EMERGENCY 06/09/08
PT# 31459241 MR# 376774
BRADWAY, TONY
05/23/1982 26 M EMR
EMR, DOCTOR 777789

PATIENT PLATE

Do Not Use Unapproved Abbreviations: U, IU, QD, QOD, X.0mg, .Xmg, MS, MSO4, MgSO4

DATE & TIME

ALL NOTES MUST BE TIMED, DATED AND SIGNED.
PRINT YOUR NAME AND IDENTIFICATION NUMBER OR USE YOUR NAME STAMP.

6/9/08 1530	pt admitted to order.	afarunkel
1545	seizure activity noted x 5 minutes, tremors of upper arms noted. medicated as ordered	afarunkel
1600	On P. Keeter in ER pt. cm > 112	afarunkel
1700	Report given to D. Carberry MD	afarunkel

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Tony Bradley
INPATIENT 06/09/08
PT# 31459241 MR# 376774
BRADWAY, TONY
05/23/1982 26 M ICU
KUBIAK, RICHARD 001917

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- 6/9/08 - Seizure precautions - ? need to start AG?
 cert. - I.V. Protaxin 40mg a day
- I.V. Zosyn 2.25gm IVPB q12h empirically
for PWD and possible aspiration pneumonia.
- Astatin 1 amp IVPB q12h.
- Venodone boots for B/T prophylaxis
- Wrist restraints @ all times
- Neurology eval - D. Pflaster et al - 4/11
- Renal / Cardiol consults eventually, c. Ac
for extremely grounded

Yr i @ Prantiss' office to
page him to me.

gr Pateled
634

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6/9/08 1450 In Patel MR & pt. ———— Agaromkela
1452 IV 700, FiO2 40% CMV12 ———— Agaromkela.

6/9/08
300P

Pulm-ccm

.PF examined in the ER.

BP 95/59

.Unresponsive, vented.

HR 46

.Chest labol CPR is reviewed.

HR 126

SpO2 100%.

A # Acute Resp failure 20 to Cocaine Intox.
Acute Cocaine Intoxication.

due to

acute

Cocaine Intox

Hypotension

Agitation / psychosis - require Ativan

Encephalopathy # S2

Leucocytosis - ? Acute demargination

Ac Met acidosis * ? occult infection

R.

Hypernatremia

Hypocalcemia

H Ac Renal Impairment - ? ATN

R.

R - Admit to ICU. - Prentiss.

- Vent CMV12/700/40%. ✓ ABG.

- IVP - D5W @ 150cc/hr. + 1/2 amp NaHCO3

- NO BETA BLOCKERS!!

- Ativan ~~drop~~ 2mg IVP Q2h - drip if
needed.

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CRITICAL RESULTS

Name: Bradley, Tony MR# 376774
Date/Time: 6/9/08 1500 Test: Arterial pH
Value: 7.06
Notified Dr. PATEL @ KOS
Dr Read Back Result ☒ New Orders Rec'd ☐ Yes ☐ No
Print Name Annette Jarzombek
Sign Name [Signature]

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crease / combative inpatient
opium mal status x?

Intubated: #8 TV 700: F10250% assisted rate 12 #23 lip

4mg Ativan: agitation 1250/1320

Salem sump: H main | falling #16 urine / 4 top sent
CT done 7 head

Repeat EKG

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1600

Pt has no contact info listed in chart. Police Officer stated pt has a mother named Tina Bradley in Brooklyn. Police made attempts to find mother. I gave but were unsuccessful so far. Listed number. Brooklyn police to go to pt's mother's house. I gave South Hampton PD ED phone# should they find mother.

6/9/08

1800

To ICU via stretcher & nursing supervisor Dillon / ET — *[Signature]*

1915

Code Blue in ICU called. Upon arrival, CPR in progress, 1 amp Calcium given. Pt in asystole on my arrival. ETT in place. 3 amps of epi / atropine given. No return of spont circ. 300mg of amiodarone given, 2 grams Mg given, FS checked (>300). 4th amp of epi given. A&B checked. No ROSC. Pt pronounced at 1913. No contact info for family available. ME + South Hampton PD informed of death by RN - Ann Marie Dillon.

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6/9/08	<p>Nurses Notes: 1815-1913 - Neuro: Pt. received from ED department unresponsive. No movement of extremities noted. Skin warm and dry.</p> <p>Resp: Pt. orally intubated on the following settings: TV 700, FIO₂ 40%, A/C D. 2.0 96% RR 20.</p> <p>CV: Under idocardiniculin infusion. HR 90's. BP 46/0. Confused by two RN's. Pt. placed on Trendelenburg. Call placed to Dr. Patel. Chris Hart PA at bedside spoke to Dr. Patel. Orders received for pt to receive 1 amp Na HCO₃ 5% of 250a Alluvia, 1 amp p50 given. Neurosyndrom</p> <p>IV w Right hand heparin. No heart beating. IV w left A/C D5W + 1 amp NIVAd + 1 amp Na bicarb infusing under press. All Aldon soft nor to be used. 1 amp sanda. M: Foley → SBD draining clear urine. urine. EKG done as ordered. Cardiac monitor shows widening of complex → asystole. Code Blue called at 1858. See Code sheet. Pt. expired at 1913. ER doctor called code. Pt. taken to morgue. No belongings. Dr. Berryman is Cardiac</p>